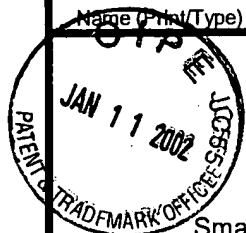


4P/3738

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.



Name (Print/Type) Kimberly W. Zuehlke Signature *Kimberly W. Zuehlke* Date 12/4/01

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Small Entity ☒

Large Entity ☐

TECHNOLOGY CENTER H3700

Application Number 09/828,539
Confirmation Number 9912
Filing Date April 5, 2001
First Named Inventor Howard Preissman
Examiner To Be Assigned
Group Art 3738
Attorney Docket No. PALX002CON

ENCLOSED:

☒ Preliminary Amendment
☐ 37 CFR §
☒ Pages 6

Claims	No. of claims as filed or after amendment	Most claims previously paid for	# Extra Claims	Rate	Totals
Total	11	20	0		\$ -
Independent	2	3	0		\$ -
Multiple					
Total Extra Claim Fees					\$ -

☐ Applicants Petition for an Extension of time from _____ to _____ A _____ month extension was previously filed and paid for thereby reducing the basic fee _____

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☐ Response to File Missing Parts (with copy of formalities letter)

☐ Filing Fee
☐ Executed Declaration
☐ Other

Pages _____

Fee _____
Surcharge Fee _____
Fee _____
Fee _____
Fee _____
Subtotal \$ -

OFFICE OF PETITIONS

☒ Information Disclosure Statement

☒ PTO Form 1449
☐ Copies of Cited References
☐ Other

Pages 4

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Subtotal \$ -

☐ Response to Notice to Comply (with copy of Notice to Comply)

☐ Sequence Listing Certification
☐ Paper Copy of Sequence Listing
☐ Diskette in computer-readable format
☐ Other

Pages _____

Fee _____

<input type="checkbox"/> Terminal Disclaimer		Fee	
<input type="checkbox"/> Appeal to Board of Appeals and Appeal Communication to Group			
<input type="checkbox"/> Notice of Appeal	Pages	Fee	
<input type="checkbox"/> Appeal Brief in Triplicate	Pages	Fee	
<input type="checkbox"/> Reply Brief	Pages	Fee \$ -	
		Subtotal \$ -	
<input type="checkbox"/> Other Enclosures and/or Fees		Fee	
<input type="checkbox"/> Change of Correspondence Address			
<input checked="" type="checkbox"/> Return Receipt Postcard		TOTAL FEES \$ -	
<p>The Commissioner is authorized to charge any fees which may be required, or credit any overpayment to Deposit Account 50-0815. If additional fees are required, including extensions of time, please consider this a petition therefore. A duplicate copy of this transmittal is enclosed.</p>			
<p>SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED</p>			
Name (Print/Type)	Frank P. Becking	Registration No.	42,309
Signature	<i>Frank P. Becking</i>	Date	12/4/01
Firm Name	Bozicevic, Field & Francis LLP	Address	200 Middlefield Road, Suite 200
City	Menlo Park	State	California
Telephone - Direct Dial	650-833-7778	zip	94025
		Facsimile	650-327-3231

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Application No. 09/828,539 Attorney Docket No. PALX002CON Page 2 of 2